

# FY 2009 ANNUAL FINANCIAL REPORT SPECIAL PURPOSE SHORT FORM

Please return completed reports to:
Office of the Comptroller
Local Government Division
100 W. Randolph Street, Suite 15-500
Chicago, IL 60601-3252
Tel: (877) 304-3899

Unit Name:		County:		Unit Code	e:		
I attest that, to the best of my knowledge, this report represents a complete and accurate statement of the financial position of the government as of the end of this fiscal year.							
	Written signa	ature of government offi	icial	Date			
Print Name:			Title:				
PLEASE CROSS OU  > STEP 1: ENTER O  Is the following information  If the Chief Executive Offiskip to Step 2. If not, please	CONTACT INFOR  n correct and completicer and the Chief Fin	MATION  ete? Yes  ancial Officer are the	No			se check	this box and
A. Contact person (elected o responsible for filling out this for		B. Chief Executive appointed official readministration, i.e. rechairman):	sponsible for	the executive	or appointed of maintaining the financial record	ficial resp governm	onsible for
First:	Last:	First:	Last:		First:	Last	
Title:		Title:			Title:		
Add:		Add:			Add:		
City:		City:			City:		
State:		State:			State		
Zip:		Zip:			Zip:		
Phone:	Ext:	Phone:		Ext:	Phone:		Ext:
Fax:		Fax:			Fax:		
F-mail <sup>.</sup>		F-mail·			F-mail·		



Contractual

Other (explain)

# > STEP 2: VERIFY FISCAL YEAR END

FY END DATE:	1	/2009	

If the fiscal year end date listed above, is incorrect, cross out the incorrect date and provide the correct date. Official documentation of this change must be sent with the AFR before the fiscal year end date can be changed.

	> STEP 3: GASB 34, ACCOUNTING SYSTEM, AND DEBT
A.	Has your government implemented GASB 34 in FY 2009 or in previous reporting years? Yes No
	If yes:
	Governments who have implemented GASB 34 and are using 'Other Comprehensive Basis of Accounting' (OCBOA) such as 'Cash Basis' and 'Modified Cash Basis' as their accounting system will now be able to select these types as their accounting system and will be able to use the Short forms.
В.	Which type of accounting system does the government use:
	☑ Cash – with no assets (Cash Basis)
	If the government uses an accounting method other than Cash – with no assets (Cash Basis), please complete the <b>Special Purpose Long Form</b> .
C.	Does the government have bonded debt this reporting fiscal year? Yes No If "Yes", indicate the type(s) of debt and complete the Statement of Indebtedness page, located on page F5.
	G.O. Bonds Revenue Bonds Alternate Revenue Bonds
D.	Does the government have debt, other than bonded debt this reporting fiscal year? Yes No If "Yes", indicate the type(s) of debt and complete the Statement of Indebtedness page, located on page F5.

Special Purpose Short Form

# > STEP 4: POPULATION, EAV, AND EMPLOYEES

^What is the total <b>population</b> of the government?	
What is the total <b>EAV</b> of the government?	\$
*How many full time employees are paid?	
* How many part time employees are paid?	
What is the total salary paid to all employees?	\$

<sup>^</sup>Or provide estimated population

#### > STEPS 5 AND 6: COMPONENT UNITS AND APPROPRIATIONS

Provide the appropriation for the primary government listed in the first row of the table below.

In the remaining rows, provide the names of all component units along with their appropriation. Indicate if the component units are blended or discretely presented, fiscal year end dates and if the component units are funded with governmental fund types or enterprise fund types. If the component units are already indicated, that data is based on forms submitted last year. If you have more component units than the rows provided below, please indicate them on an attachment.

If you need assistance with the terms indicated below, refer to the Chart of Accounts and Definitions and the How To Fill Out An AFR documents.

Name of Unit/Component  FUNDS SHOULD NOT BE LISTED HERE*	Appropriation^	Type of Component Unit (Blended or Discretely Presented)	Fiscal Year End	Fund Type
	\$			
	\$		/ / 2009	
	\$		/ / 2009	
	\$		/ / 2009	
	\$		/ / 2009	
Total Appropriations	\$			

<sup>\*</sup>Do not enter funds such as: Joint Bridge, Permanent Road, Town Fund, Equipment, Water & Sewer, General Assistance, etc.

<sup>\*</sup>Do not include contractual employees.

These funds should be included in Step 9.

Alf the Primary Government or Component Unit does NOT budget or levy taxes, please enter the unit's TOTAL EXPENDITURES.

# > STEP 7: AUDITS

Provide CPA's information if the government is required to submit an audit to the Office of the Comptroller.

Firm Name:	
CPA's first name:	
CPA's last name:	
CPA's title:	
Address:	
City:	
State:	
Zip:	
Phone:	· · · · · · · · · · · · · · · · · · ·
Fax:	
Email:	
State Registration Number:	

# > STEP 8: OTHER GOVERNMENTS

Indicate any payments the government has made to other governments for services or programs (include programs performed on a reimbursement, cost-sharing basis or federal payroll taxes).

Intergovernmental agreements – indicate how much was paid	\$
Federal government payroll taxes	\$
All other intergovernmental payments	\$

#### > STEP 9: FUND LISTING

List all funds, indicate the amount spent in FY 2009 for each fund. Also indicate the Fund Type (fund types are at the top of each column beginning on page F1).

If pre-printed data appears it is based on forms submitted last year. Please make all necessary corrections. If you have more fund

names than the rows provided below, please indicate them on an attachment.

Fund Name	Expenditure	Fund Type	FY End
	\$		/ / 2009
	\$		/ / 2009
	\$		/ / 2009
	\$		/ / 2009
	\$		/ / 2009
	\$		/ / 2009
Total Expenditures	\$		

# > STEP 10: GOVERNMENTAL ENTITIES

**List the governmental entities that are part of or related to the primary government.** Exclude component units detailed in Step 5 & 6. Most small governments do not have governmental entities.

Entity Name	Relationship

# > STEP 11: REPORTING

Check any state or local entity where financial reports are filed.

STATE AGENCIES				
Board of Education	Board of Higher Education			
DCEO	Department of Insurance			
OTHER STATE OF	OTHER STATE OR LOCAL OFFICES			
	Secretary of State			
General Assembly – House	General Assembly – Senate			
- County Clerk	Circuit Clerk			
Governor's Office	Other			

Special Purpose Short Form

# Cash, Investments, Liabilities & Fund Balance

				Discretely Presented
	Enter all Amounts in Whole		Special	Component
Code	Numbers	General	Revenue	Units
		Repo	rt In Whole Numb	ers
101	Cash and cash equivalent			
102	Investments			
F	T	<u> </u>	Т	1
135	Total Liabilities			
<b>.</b>	<u> </u>		1	
136	Fund balance - Reserved			
137	Fund balance - Unreserved			

NOTE: This alternative Assets & Liability page should be used by those units of government that have implemented GASB 34. If your unit of government has not implemented GASB 34, please leave this page blank and proceed to page F2.

Code	Enter all Amounts in Whole Numbers	Governmental Activity	Discretely Presented Component Units
		Report In Who	le Numbers
101	Cash and cash equivalent		
102	Investments		
135	Total Liabilities		
148	Net Assets - Restricted		
	Net Assets - Unrestricted		

**Revenues and Receipts** 

Code	Enter all Amounts in Whole Numbers Local Taxes	General	Special Revenue	Discretely Presented Component Units
201	Property Tax	- 1-		
203	Utility Tax			
204	Other Taxes			
In	tergovernmental Receipts & Gran	ts		
212	State Sales Tax			
213	State Motor Fuel Tax			
214	State Replacement Tax			
205	State Gaming Tax(es)			
215	Other State Sources			
225	Federal			
226	Other Intergovernmental Sources			
	Other Sources		,	
231	Licenses and Permits			
233	Fines and Forfeitures			
234	Charges for Services			
235	Interest			
236	Miscellaneous			
240	TOTAL RECEIPTS AND REVENUE			

Disbursements, Expenditures and Expenses

	Dispursements, Expe	naitures and Expe	enses			
				Discretely		
				Presented		
				Component		
Code	Enter all Amounts in Whole Numbers	General	Special Revenue	Units		
		Repo	Report In Whole Numbers			
251	General Government					
252	Public Safety					
254	Judiciary and Legal					
255	Transportation and Public Works					
256	Social Services					
257	Culture and Recreation					
258	Housing					
275	Environment					
259	Debt					
271	Public Utility Company					
272	Depreciation					
280	Capital Outlay					
260	Other Expenditures or Expenses					
270	TOTAL EXPENDITURES/EXPENSE					

Fund Balances and Other Financing Sources (Uses)

					Discretely Presented Component	
Code	Enter all Amounts in Whole Numbers		General	Special Revenue	Units	
		Report In Whole Numbers				
301	Excess of receipts/revenues over (under expenditures/expenses (C240 - C270)					
302	Operating transfers in					
303	Operating transfers out	(	)	( )	( )	
304	Bond proceeds					
305	Other - Long term debt (explain)					
306	Net increase (decrease) in fund balance (301 + 302 - 303 +304 + 305)					
307	Previous year fund balance					
308	Other (explain on page 9)					
310	CURRENT YEAR ENDING FUND BALANCE (306 + 307+ 308)					

#### **Statement of Indebtedness**

		Outstanding Beginning of		Issued Current		Retired Current		Outstanding
<b>Debt Instruments for All Funds</b>	Code	Year	Code	Fiscal Year	Code	Fiscal Year	Code	End of Year
			Report	In Whole Numb	pers			
General Obligation Bonds	400		406		412		418	
Revenue Bonds	401		407		413		419	
Alternate Revenue Bonds	402		408		414		420	
Contractual commitments	403		409		415		421	
Other	404		410		416		422	
TOTAL DEBT	405		411		417		423	

#### \*Capital Outlay

		These are not funds			
Code	Function	Construction	Land, Structures and Equipment		
601	General Government				
602	Law Enforcement				
603	Corrections				
604	Fire				
605	Sewerage				
606	Sanitation and Wastewater				
607	Parks & Recreation				
608	Housing & Community Development				
609	Highways, Roads and Bridges				
610	Parking Facilities				
611	Welfare				
612	Hospital				
613	Water				
614	Nursing Homes				
615	Conservation and Natural Resources				
616	Libraries				
617	Other				

<sup>\*</sup>This page should only be filled out if you have spent funds for capital projects or development.

<sup>\*</sup>The Capital outlay page is requested by The U.S. Census Bureau and is considered optional by the State Comptroller

<sup>\*</sup>If you complete this page you WILL NOT have to do the Survey of Government Finances from the US Census Bureau.

<sup>\*</sup>If you do NOT complete this page the Census Bureau will contact you for further information.